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Effective on 12/08/2004.

Application Number Application Number Application Number Application Number Application Number Application Applica	Effe Fees pursuant to the Conso.	ective on 12/08/200 olidated Appropriati		3).		Complete	if Known	
First Named Inventor		• • •			ation Number	09/700,316		
Applicant claims small entity status. See 37 CFR 1.27 Examiner Name Cameron Sasadat	FEE TRANSMITTAL			Filing	Filing Date November 14, 2000		0	
TOTAL AMOUNT OF PAYMENT (\$) 120.00 Art Unit Attorney Docket No. 28880,0039 METHOD OF PAYMENT (check all that apply) Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): Deposit Account Deposit Account Number:19-5127(25880,0039) Deposit Account Name: Swidler Berlin LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) ☐ Credit any overpayments WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity Application Type Fee (\$) Fee(\$) Fe	ຄັ _ສ) for FY 2005			First N	lamed Inventor	Lars-Olof Öhberg		
METHOD OF PAYMENT (check all that apply)					ner Name	Cameron Saadat		
METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify) :				Art Un	it	3713		
Check	TOTAL AMOUNT OF P	'AYMENT (\$)	120.00	Attorn	ey Docket No.	Oocket No. 25880,0039		
Deposit Account Deposit Account Number:19-5127(25880.0039) Deposit Account Name: Swidler Berlin LLP	METHOD OF PAYME	NT (check all	that apply)					
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below, except for the filing fee Charge fee(s) Credit any overpayments Charge fee(s) indicated below, except for the filing fee Charge fee(s) Credit any overpayments Charge fee(s) Credit any overpayments Charge fee(s) Credit card information and authorization on PTO-2638. FEE CALCULATION	☐ Check ☐ Credit (Card 🔲 Mone	y Order 🔲 None	Other	(please identif	y):		
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Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments Under 37 CFR 1.16 and 1.17	For the above-	identified depos	it account, the Directo	r is hereby	authorized to:	(check all that ap	ply)	
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments	⊠ Charge	fee(s) indicated	below		☐ Chai	rge fee(s) indicate	d below, except	t for the filing fee
Uniter 37 CFR 1.16 and 1.17	<u> </u>			ts of fee(s)	⊠ Cred	lit any overpayme	nts	
Information and authorization on PTO-2038. FEE CALCULATION	Under 3	37 CFR 1.16 and	11.17					
### Telephone of total claims paid for, if greater than 20. Indep. Claims Extra Claims paid for, if greater than 20. Indep. Claims Extra Claims paid for, if greater than 3. ### APPLICATION SIZE FEE If the specification N =				rd informati	on should not b	e included on this	form. Provide cre	edit card
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Utility							Small Entity	
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Reissue 300 150 500 250 600 300	Design	200	100	100		130	65	
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2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each claim over 30 (including Reissues) Each claim over 30 (including Reissues) Each claim over 30 (including Reissues) Multiple dependent claims Total Claims Extra Claims Extra Claims Fee(\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Extra Claims Fee(\$) Fee Paid (\$) Indep. Claims Extra Claims Fee(\$) Fee Paid (\$) 2 - 3 or HP =	Reissue	300	150	500	250	600	300	
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Other (e.g., late filing surcharge): Petition for Extension of Time (1 month) \$120.00 \$120.00 SUBMITTED BY Signature Registration No. (Attorney/Agent) 40,161 Telephone 202-424-75	4. OTHER FEE(S)							Fees Paid (\$)
SUBMITTED BY Signature Registration No. (Attorney/Agent) 40,161 Telephone 202-424-75	Non-English S	Specification, \$1	30 fee (no small entit	ty discount	:)			
Signature Registration No. (Attorney/Agent) 40,161 Telephone 202-424-75	Other (e.g., la	te filing surchar	ge) : Petition for Exten	sion of Tim	e (1 month) \$12	0.00		\$120.00
Signature Registration No. (Attorney/Agent) 40,161 Telephone 202-424-75								
	SUBMITTED BY							
	Signature	mulaul	1 Alwert	7	-	40,161	Telephone	e 202-424-750
		Michael A. Schwartz			((Date	January 12,

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Cameron Saadat

Examiner

Small Entity Fee

<u>Fee</u>

Art Unit

application.

3713

more than one signature is required, see below. Total of 2 forms are submitted.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)	Docket Number (Optional) 25880.0039		
Application Number 09/700,316	Filed November 14, 2000		

For METHOD FOR SIMULATED TESTING OF MISSILE

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

		ree	Small Entity ree					
	One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ <u>120.00</u>				
	Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$				
	☐ Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$				
	Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$				
	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$				
☐ Applica	nt claims small entity status. See 37 CFR	1.27.						
A check in the amount of the fee is enclosed.								
Payment by credit card. Form PTO-2038 is attached.								
☐ The Director has already been authorized to charge fees in this application to a Deposit Account.								
☐ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to								
Deposit Account Number 19-5127 (25880.0039). I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
I am the	applicant/inventor.							
assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).								
☑ attorney or agent of record. Registration Number 40,161								
attorney or agent under 37 CFR 1.34.								
Registration number if acting under 37 CFR 1.34								
Mulleul a plurity January 12, 2006								
	Signature		Date					
***	Michael A. Schwartz		202-424-7500					
Typed or printed name Telephone Number								

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETEDFORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents. P.O. Box 1450, Alexandria, VA 23313-1450. TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if